2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

P93000019597

1. Entity Name RYL, INC.



FILED Apr 17, 2003 8:00 am Secretary of State 04-17-2003 90200 003 ***150.00

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Principal Place of Business 8302 SUMMERSONG TERRACE BOCA RATON FL 33496			Mailing Address 8302 SUMMERSONG TERRACE BOCA RATON FL 33496								
2. Principal Place of Business		3. Mailing Address				L I BEHARN I KE TOIRO HIHI BOHL DEHI:		i i i i i i i i i i i i i i i i i i i			
Suite, Apt. #, etc.			Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES					
City & State			City & State			ББ-ГИЛБЯУК				<u> </u>]
Country				Country					\$8.75 Additional Fee Required		
6. Name	and Address of Current	Registere	ed Agent			7. N	lame and Address of New Re	gistered Ag	ent		4
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TA Y IMFRSONG	TERRACE		Street Address			(P.O. Box Number is Not Acceptable)					1
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		or the purp	ose of changing its r	egistered off	fice or register	red age	ent, or both, in the State of Flori	ida. I am fai	miliar with,	and accept	
Signature, typed	or printed name of registered agent	and title if app	licable. (NOTE:	Registered Agen	it signature required	d when rei	instating)	DATÉ			
May 1, 200	03 Fee will be \$550.00	f State					, -				
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pn	OFFICENS AND	DIRECTO		-		, ADI	DITIONO) GHANGEO TO GITTE				1 8
LEWIN, RI 8302 SUM	IMERSONG TERRACE		□ Delete	NAME Street add				•	change		7007
1001 SW			☐ Delete	•				-	Change	☐ Addition	
MIN TON 1 E			□ Delete	TITLE					Change	Addition	1
	العالم المعالمين المعارض المعا		- proservent	NAME *	DRESS		٠ . مسحي				
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	Isong TERRA FL 33496 Iace of Busin #, etc. 6. Name TA Y IMERSONG TON FL 33 named entitions of regist Signature, typed ILE NOW! May 1, 200 Regist ILEWIN, Ri 8302 SUM BOCA RA ST WHITE, RI 1001 SW MIAMI FL	Country 6. Name and Address of Current TA Y MERSONG TERRACE TON FL 33496 named entity submits this statement for ions of registered agent. Signature, typed or printed name of registered agent ILE NOW!!! FEE IS \$150.00 May 1, 2003 Fee will be \$550.00 or Payable to Florida Department or OFFICERS AND PD LEWIN, RITA Y 8302 SUMMERSONG TERRACE BOCA RATON FL 33496 ST WHITE, RONNIE L. 1001 SW 129TH TERRACE MIAMI FL	Isong TERRACE FL 33496 BOCA Ilace of Business #, etc. Country Country Country Tap 6. Name and Address of Current Registere TA Y IMERSONG TERRACE TON FL 33496 Inamed entity submits this statement for the purplions of registered agent. Signature, typed or printed name of registered agent and title if applications of the purplions of registered agent. Signature, typed or printed name of registered agent and title if applications of the purplions of registered agent. Signature, typed or printed name of registered agent and title if applications of the purplication of th	SONG TERRACE FL 33496 South Art No. 1	SONG TERRACE FL 33496 South	Isong TERRACE FL 33499 Isoca RATON FL 33499 Isoca Parton FL 33496 Isoca Parton FL 33496	Isono TERRACE FL 3499 BOCA RATON FL 33496 3. Mailing Address #, etc. Suite, Apt. #, etc. Country Zip Country Zip Country TA Y MERSONG TERRACE TON FL 33496 City MERSONG TERRACE TON FL 33496 City Name and Address of Current Registered Agent TA Y MERSONG TERRACE TON FL 33496 City Inamed entity submits this statement for the purpose of changing its registered office or registered agent on of registered agent. NOTE: Registered Agent signature required agent and the if applicable. NOTE: Registered Agent signature required when recuired agent sagnature. The purpose of changing its registered Agent signature required when recuired agent so or registered agent signature. The purpose of changing its registered Agent signature required when recuired agent signature. The purpose of changing its registered Agent signature required when recuired agent signature. The purpose of changing its registered Agent signature required when recuired agent signature. The purpose of registered Agent signature required when recuired agent signature. The purpose of registered Agent signature required agent signature required agent signature. The purpose of registered Agent signature required agent signature. The purpose of changing its registered office or registered agent signature. 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I am for one of registered agent, or both, in the State of Florida. I am for one of registered agent. Description of preed raine of legistered agent and the Registered Agent spraws measured when revalled byte. Description of preed raine of legistered agent and the Registered Agent spraws measured when revalled byte. Description of Polymon of Polymon of State Description of Polymon of State Defect	SONG TERRACE FL 33498 SOCIA RATION FL 33496 SUID, APL #, etc. City & State Current City & State Country City City & State Country City City & State Country City City Country S. Countrate of Status Desired State	SONS TERRACE FI. 3349S SOUR ACTION FI. 3349S SOUR ACTION FI. 3449S Source Action Fig. 3449S Country Zip Country Zip Country Zip Country Zip Country Zip Country Zip Country Size Addroose (F.O. Box Number in Net Acceptable) Severt Addroose (F.O. Box Number in Net Acceptable) Fig. Rec. Name Applied For Name Name Name Name Name City Fig. Recult Street Addroose (F.O. Box Number in Net Acceptable) City Fig. Recult City Fig. Recult Applied For Fig. Recult Street Addroose (F.O. Box Number in Net Acceptable) City Fig. Recult City Fig. Recult Applied For Fig. Recult Street Addroose (F.O. Box Number in Net Acceptable) City Fig. Recult City Fig. Recult Applied For Fig. Recult Street Addroose (F.O. Box Number in Net Acceptable) City Fig. Recult Applied For Fig. Recult Street Addroose (F.O. Box Number in Net Acceptable) City Fig. Recult City Fig. Recult Applied For Fig. Recult Street Addroose (F.O. Box Number in Net Acceptable) Fig. Recult Applied For Fig. Recult Applied For Fig. Recult Street Addroose (F.O. Box Number in Net Acceptable) Fig. Recult Applied For F

necestricting that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: